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DRUG PROBLEMS: THE SOCIAL AND ECONOMIC IMPLICATIONS

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DRUG PROBLEMS: THE SOCIAL AND ECONOMIC IMPLICATIONS

INTRODUCTION

A Resolution adopted by the Thirty-third World Health Assembly in 1980 affirmed that drug abuse is "a serious health hazard of steadily growing proportions in developing nations as well as industrialized countries."⁽¹⁾ It encouraged Member States to devote more attention to the disruptive effect of drug abuse on the lives and future careers of young people and pointed out its negative impact on socioeconomic well-being in general, the increasing difficulties in enforcing the law, and the need for taking measures to reduce the demand for and illicit supply of drugs of abuse.

The use of illegal drugs appears to be a worldwide phenomenon, presenting serious multi-faceted and interconnecting problems. The scope of these problems and the measures taken by governments to deal with them vary considerably among nations. This paper discusses some of the social and economic implications of drug abuse and some of the remedial approaches undertaken or considered.

For the purposes of this discussion, the term "drug abuse" will be used to include any non-medical and illicit use of psychoactive drugs. There are sound reasons for including alcohol and nicotine in a discussion of drug problems, in view of the health risks associated with their use. These drugs, however, have been generally accepted within an established social and legal framework and therefore may be considered to be in a separate category. This brief paper will limit discussion to the problems associated with the use of illegal drugs.

(1) WHA Resolution 33.27, 1980.

Although the use of psychoactive substances is not a modern phenomenon, drug addiction problems in many countries reached serious proportions only in the 1960s. Changes have taken place since then, not only in the substances used but in the type of users as well. Technical advances in the past two decades have added new dimensions to the problem, making different and sometimes more dangerous substances available to potential and established users. Addiction is no longer a "big city" problem but has spread to small towns and rural areas in Canada, the United States, and a number of other countries.

The pattern of illicit drug use is related to the available supply of and demand for such substances. Accordingly, an international drug abuse control strategy, outlined by a Resolution of the United Nations in 1981, urged that measures be taken to reduce both the traffic in illicit drugs and the demand for them.⁽²⁾

Most nations, both developed and developing, have experienced increased illegal drug traffic in recent years. The huge sums of money generated from it have made drug smuggling a highly organized and large scale criminal activity that encourages corruption at different levels of society. Because traffickers of illegal drugs also actively market them and promote their use, efforts to reduce the supply of these substances have become an important and established means of drug control.

The "drug scene" is complex, however, involving both individuals and society at large. In any drug abuse situation, given the availability of the illegal substance, the demand for it is determined by a number of factors. There is an interaction between the individual abuser and the existing social environment. Multi-drug use has become common in western societies, as people have increasingly depended upon chemical solutions to physical, mental and emotional problems.

Numerous factors may account for the consumption of illegal drugs. Individuals may be searching for relief from depression, stress or other problems, or may simply be seeking thrills or feelings of euphoria.

(2) U.N. General Assembly, Resolution 36/168, 16 December 1981.

In some cases, drugs are taken in an attempt to overcome tiredness and to increase productivity. (Even in the otherwise healthy field of competitive sport, drugs have come to be used by some to improve performance.) Societal acceptance of the use of some drugs, such as alcohol, may encourage experimentation with others. Teenagers may be induced to try illegal drugs as an act of rebellion against authority or merely to conform to the behavioural model promoted by peer pressure.

Adverse social conditions may also constitute risk factors, facilitating the growth of a criminal subculture always ready to recruit new members. The problems of drug abuse, however, are not limited by class, or to any particular groups, but involve and affect society as a whole. Their social and economic implications are enormous. Before considering possible solutions, it is necessary first to understand the scope of the problems.

SCOPE OF THE PROBLEMS

In recent years, most western nations have recognized the seriousness of the problems of illegal drug use. In 1984 the United Nations Social Defence Research Institute reported that the "actual increase in the use of narcotics and psychotropics throughout the world, and in particular among juveniles, has sensitized and disturbed public opinion."⁽³⁾ The Secretary-General of the United Nations in 1985 called drug abuse "as destructive a threat to this and coming generations as the plagues which swept many parts of the world in earlier centuries."⁽⁴⁾ The U.N. General Assembly passed a Resolution in December 1985 urging all nations to work to the utmost to combat drug abuse and illegal trafficking.

In the United States, a "war on drugs" was declared, and anti-drug abuse legislation was passed in 1986. The White House Conference for a Drug Free America held hearings across the country and submitted its

(3) Francesco Bruno, *Combatting Drug Abuse And Related Crime*, United Nations Social Defence Research Institute, Rome, 1984, p. 31.

(4) *UN Chronicle*, August 1987, p. 7.

report in 1988. Its Chairman warned that drugs "threaten to destroy the United States as we know it." The report stated that "approximately 37 million used an illegal drug in the past year and 23 million, or almost 1 in every 10 Americans, used an illicit drug in the past month. The effects of this illegal drug use are staggering." (5)

In Canada, the level of illegal drug activity known to police increased substantially between 1962 and 1987. Although the rate of some drug offences stabilized during that period, there was a marked rise in that of others, including cocaine offences. (6)

There were 11,203 known users of illicit narcotic drugs in this country in 1986. (7) While the overall number of drug users had declined from 1980, cocaine users had increased from 2,468 in 1980 to 6,256 in 1986, to become 55.8% of the total number of illicit narcotic users. (These figures do not include cannabis use.)

RCMP figures indicate that 1,618 persons were charged with cocaine-related offences in 1987, an increase of 16% from the previous year. (8) The amount of cocaine seized increased by 41% between 1986 and 1987. (9) A 1987 Ontario survey found that 6.1% of adults, 18 years and over, in that province had used cocaine, about double the figure reported in 1984. The same survey found that 9.5% of Ontario adults had used marijuana within the previous twelve months. (10)

The use of cocaine appears to have increased in Europe as well in recent years. Treatment centres in a number of countries,

(5) *The White House Conference For A Drug Free America*, Final Report, U.S. Government Printing Office, Washington D.C., June 1988, p.1.

(6) Statistics Canada, *Juristat*, Catalogue 85-002, May 1988, p. 17.

(7) M. Adrian *et al.*, *Statistics on Alcohol and Drug Use in Canada and Other Countries*, Alcoholism and Drug Addiction Research Foundation, Toronto, 1989, Table 14.

(8) Royal Canadian Mounted Police, *National Drug Intelligence Estimate 1987/88*, Ottawa 1988, p. 42.

(9) *Ibid.*, p. 43.

(10) R.G. Smart and E.M. Adlaf, *Alcohol and Other Drug Use Among Ontario Adults 1977-1987*, Alcoholism and Drug Addiction Foundation, Toronto, 1987, Tables 11 and 12.

including England, have reported large increases in the proportion of drug abusing patients who use cocaine. (11)

As well as the serious problems associated with the use of the "traditional" drugs, new dangers to society have accompanied the development and marketing in recent years of synthetic chemical drugs and the cocaine mixture called "crack". These are often developed at relatively little cost for great profit. Because crack is less expensive than cocaine, it is more accessible to young people and others. Crack has quickly become a major problem in some American cities and its use is spreading in Canada as well. Although there were no crack seizures in Toronto, for example, in 1986, there were 789 reported by police in 1988. (12)

The Canadian government has recognized the seriousness of the threat posed by the traffic in illegal drugs. In 1987 the Canadian National Drug Strategy was introduced, with plans for long-term action for prevention, treatment and law enforcement.

Clearly, both nationally and internationally, the use of and trafficking in illegal drugs have far-reaching social implications, including adverse effects on health, increased criminal behaviour, family violence and other kinds of social dysfunction. There are also important economic consequences, including the resultant costs to the health care and criminal justice systems, and the loss of productivity and of human potential.

SOCIAL AND ECONOMIC IMPLICATIONS

A. Health Implications

The use of illegal drugs can lead to physical, psychological and social problems. These are, however, usually associated with other

(11) Patricia G. Erickson and others, *The Steel Drug: Cocaine in Perspective*, Lexington Books, Toronto, 1987, p. 35.

(12) Victor Malarek, "Crack Use Near Epidemic, Toronto Police Warn," *The Globe and Mail* (Toronto), 11 February 1989.

problems and clear assessments of their extent cannot be made. The health hazards of drug use vary widely according to the nature of the substance and the length of time it is used.

As early as 1962, a World Health Organization survey of legislation on the treatment of drug-dependent persons noted that drug addicts were increasingly recognized as sick people in need of effective treatment and rehabilitation.⁽¹³⁾ Approaches to their treatment have varied in different countries, sometimes through specialized laws and sometimes through more general legislation concerning mental health or criminal activity. A WHO study on the sociocultural aspects of drug problems recognised that no one strategy can be applied to all situations, and that what is required is a flexible approach, taking into account sociocultural considerations and local needs.⁽¹⁴⁾

During 1983-84, there were in Canada 18,848 hospitalizations in general or allied special hospitals for the treatment of drug-related disorders.⁽¹⁵⁾ While this number might appear to suggest that most people in need of care in this country are receiving it, in fact, a House of Commons committee in 1987 reported the existence of "serious gaps in the availability of treatment services for drug abuse in Canada. Of special concern is the scarcity of treatment resources for adolescents."⁽¹⁶⁾ Health problems associated with drug abuse appear to have grown more quickly than the capacity of the health care system to deal with them.

Mortality due to drug overdose is a complex public health problem. Although drug addicts usually build up tolerance to the substances they use, addiction does sometimes result in death. In the United States, for example, it has been found that about one per

(13) L. Porter *et al.*, *The Law and the Treatment of Drug and Alcohol-Dependent Persons*, World Health Organization, Geneva 1986, p. 13.

(14) *Ibid.*, p.18.

(15) Adrian (1989), Tables 61 and 62.

(16) Canada, House of Commons, Standing Committee on National Health and Welfare, Report, "'Booze, Pills and Dope': Reducing Substance Abuse in Canada", 1987, p.14.

cent of heroin addicts die from overdose each year.⁽¹⁷⁾ In 1985 there were 39 deaths reported in Canada due to poisoning by opiates and related narcotics.⁽¹⁸⁾

An expert in the field of substance abuse has reported that very little is known on an ongoing basis about the nature and magnitude of the health consequences of illicit drug use.⁽¹⁹⁾ There is a need for more longitudinal studies in order to better understand these problems.

Among illegal drugs, cannabis (marijuana or hashish) appears to be the most popular and generally available, and seems to be the least costly to society. It is noteworthy, however, that studies have indicated that "there is a greater prevalence of other behavioural risk factors such as cigarette smoking and alcohol use among the users of this drug."⁽²⁰⁾ A 1987 study in Alberta found that 60% of marijuana or hashish users also smoked cigarettes and all consumed alcohol, compared with 33% and 83%, respectively, of the general public sampled.⁽²¹⁾

Cannabis use has also been found to be a precursor and predictor of other illegal drug use. It has been described as a "boundary" drug because its users often go on to use one or more other drugs. Studies have shown that 100% of LSD users and of cocaine users surveyed had also used cannabis.⁽²²⁾ There is an indication in these findings of the interaction of multiple risk factors with the potential for serious health consequences.

The rise in the use of cocaine is of particular concern. It is known that cocaine is very addictive and that its prolonged use

(17) Judith C. Blackwell and Patricia G. Erickson, eds., *Illicit Drugs in Canada*, Nelson Canada, Scarborough, 1988, p. 57.

(18) Adrian (1989) Table 110.

(19) Irving Rootman, in Blackwell and Erickson (1988), p.225.

(20) George Parakulam, "Promoting the Health of Albertans: A Study of Practices, Attitudes and Beliefs Impinging on Chronic Disease Prevention," Alberta Department of Community and Occupational Health, 1987, p. iv.

(21) *Ibid.*, p. 56.

(22) Helen McKenzie, "Drug Abuse in Canada," Current Issue Review 87-7E, Research Branch, Library of Parliament, Ottawa, p. 6.

is accompanied by a number of health hazards, both physical and psychological. These include nasal congestion and cardiovascular changes, heart disease, and sometimes hallucinations, paranoia and aggressiveness. With the advent about five years ago of cocaine "basing", the dose levels of cocaine have increased significantly. "To put it in terms of an alcohol-use analogy, basing versus snorting cocaine is something like the difference between drinking a sixpack of beer and drinking a sixpack of fifths of vodka." (23) Another major cause for concern is the spread in the use of the new form of this drug ("crack"), which is quickly addictive and very dangerous.

In recent years, a new health problem associated with drug abuse has arisen with the spread of AIDS among intravenous drug users. American Centers for Disease Control "have established that approximately 25% of all AIDS victims acquire the disease through intravenous drug use and the sharing of dirty needles." (24) The fact that this deadly condition is being spread in this way represents a serious threat to world health in the near future.

A health-threatening trend of less frightening proportions, but one nevertheless with serious implications, is the increasing use in recent years of steroids by athletes in some competitive sports. This hidden drug use has the potential for long-term health damage of a largely unknown extent.

B. Criminal Behaviour

Research has shown that "the association between drug abuse and criminal behaviour is very close." (25) The use of illegal drugs is an important factor in various kinds of crime. Possession, cultivation, importation of and trafficking in illegal drugs are proscribed by law in Canada and most other countries. In addition, illegal drugs, aside from

(23) Helen Axel, ed., *Corporate Strategies for Controlling Substance Abuse*, Report No. 863, The Conference Board, Inc., New York 1986, p. 21.

(24) White House Conference, Report, 1988, p.3.

(25) Bruno (1984), p.160.

marijuana, engender predatory crime. (Marijuana is not included in this category, probably because it is inexpensively available and has a tranquillizing effect.) They are associated with many criminal activities ranging from homicide and other violent acts carried out under the influence of drugs or in connection with trafficking, to robberies and theft performed to support expensive drug habits.

In the United States, pretrial urine testing in Washington, D.C. in 1986 revealed that 67% of persons arrested for other than drug charges tested positive for illegal drugs (including opiates, cocaine and amphetamines but not including marijuana) at the time of their arrest, and 32% had used more than one drug.⁽²⁶⁾ It was also found that re-arrest rates were 50% higher for drug users than for non-users and that the likelihood of being re-arrested increased when more than one drug had been used.⁽²⁷⁾

Other studies have shown that the criminality rate of daily users of heroin was about seven times as great as when the same people were not using heroin or were using it only sporadically.⁽²⁸⁾

Among young people as well as among adults there appears to be an association between illegal drug use and criminal behaviour. The results of American studies indicate that "frequent use and abuse of drugs is more common among youths who engage in chronic delinquent behavior than among other adolescents."⁽²⁹⁾

In Canada about 6% of all inmates in federal penitentiaries in 1987 were in prison for drug offences. It has been estimated also that about 70% of all prisoners in these institutions use illicit drugs. Studies indicate that drugs are an important factor in violence and suicide in prisons. In 1988 the Solicitor-General stated that more than 200 major

(26) Mary A. Toborg *et al.*, *The Washington, D.C., Urine Testing Program for Arrestees and Defendants Awaiting Trial: A Summary of Interim Findings*, Toborg Associates Inc., Washington D.C., 1986, p. 1.

(27) *Ibid.*, p. 2.

(28) John Kaplan, "Taking Drugs Seriously," *Public Interest*, Summer 1988, p. 47.

(29) J. David Hawkins *et al.*, "Delinquency and Drug Abuse: Implications for Social Services," *Social Service Review*, June 1988, p. 258.

violent incidents had occurred in federal penitentiaries in the previous three years and that nearly 60% of them had involved drugs and drug trafficking.(30)

C. Other Social Problems

Information on mental or emotional problems resulting from the use of illegal drugs is inadequate and inconclusive. Studies that are available usually put drug dependency in the same category as neuroses, psychoses, alcoholism or other conditions. It appears, however, that there is a whole spectrum of interconnected health and social problems associated with the use of illegal drugs. Problems of family breakdown, child abuse and other violence within the family setting, of suicide and accidental deaths often accompany lifestyles that include alcohol and drug abuse.

The White House Conference concluded that illicit drug use "usually damages the family. Each member must cope with the ramifications of addiction, deception, crime, health problems and ruined lives."(31)

A 1987 study on wife battering in Canada found that 24% of the women victims of abuse reported that their partners had a history of drug abuse.(32) Studies on child abuse and neglect have indicated that, among their other problems, the abusing parents are often alcoholics or drug addicts, in poor physical and mental health and in an unstable family situation.(33) An expert witness told a House of Commons Committee studying child abuse that "in between one third and one half of all these cases of violence, criminal forms of violence, alcohol and/or drug abuse has been involved."(34)

(30) *Justice Report*, Summer 1988, p. 18.

(31) White House Conference, Report, p. 4.

(32) Linda MacLeod, *Battered But Not Beaten: Preventing Wife Battering in Canada*, Canadian Advisory Council on the Status of Women, Ottawa 1987, p. 30.

(33) Naomi Feigelson Chase, *A Child Is Being Beaten*, Holt Rinehart, New York, 197, p. 111.

(34) Professor Cyril Greenland, Canada, House of Commons, Standing Committee on Health, Welfare and Social Affairs, Report, "Child Abuse and Neglect," Ottawa 1976, p. 71.

Parents with drug dependencies find it difficult to alter their lifestyles to accommodate the needs of children. Serious neglect is often the result. Similarly, it appears that family breakdown sometimes results from the inability of an addicted person to change personal habits to accommodate the needs of others or to maintain close relationships.

D. Economic Implications

The use of illicit drugs results in serious economic costs to society, relating to law enforcement and the criminal justice system, as well as the social welfare and health care systems. In addition, there is the incalculable but presumably huge loss of human potential caused by drug abuse. Based on extensive evidence, the White House Conference Report warned of the implications for the future of a society in which illegal drug use is common. "Children...adopt superficial values and seek instant gratification. Too many are turning on and tuning out, failing to learn and produce at the critical time in their lives when they...need to do so." (35)

The Report estimated the national costs related to illegal drug use in the United States at more than \$100 billion a year and outlined their elements as follows:

Illicit drug use is responsible for a substantially higher tax rate to pay for local law enforcement protection, interdiction, border control, and the cost of investigation, prosecution, confinement and treatment. This drug use increases the cost of goods and services to pay for lower productivity, absenteeism, workplace accidents and theft. Illicit drug use adds enormously to the national cost of health care and rehabilitation services. (36)

On the basis of 1980 United States statistics, a research institute prepared an analysis of the projected economic costs to society

(35) White House Conference Report, p.4.

(36) *Ibid.*

of drug abuse in 1983 in that nation.⁽³⁷⁾ The estimated total cost was \$59,747 million, made up of the following components:

Core (health) costs - (Millions)

Direct:

Treatment and Support.....\$ 2,049

Indirect:

Mortality (production lost due to premature death)..\$ 2,486

Reduced Productivity.....\$33,346

Lost Employment.....\$ 405

Other Related Costs -

Direct:

Crime\$ 6,565

Social Welfare Programs\$ 3

Other\$ 677

Indirect:

Victims of Crime.....\$ 945

Crime Careers.....\$10,846

Incarceration.....\$ 2,425

This study estimated costs associated with treatment, research and prevention programs, treatment of related health problems, crime, reduced productivity, and lost employment. It also assumed an additional cost associated with mental disorders. "Although the researchers acknowledge that "pure" ...drug abusers are rare, and that substance abuse and mental illness are often linked, their analysis attempts to eliminate this cost overlapping."⁽³⁸⁾

The Alcoholism and Drug Addiction Research Foundation in Toronto has provided the following estimates of costs resulting from illegal drug use in Canada in 1984:

(37) Axel (1986), p. 13.

(38) *Ibid.*

- Excess health care costs totalled \$2,728 million;
- The value of reduced labour productivity (based on costs resulting from increased accident occurrence among drug users) was about \$1,025 million;
- Law enforcement costs due to illegal drugs were approximately \$849 million. (39)

Health care costs in this estimate were based on a calculation of the costs of health care services for illness in drug users, compared to costs expected for the general population. It might be suggested, however, that in the larger sense of health care, costs resulting from drug use might well be far more extensive, if one were to include, for example, professional counselling for mental conditions resulting from or affected by drug use.

The Canadian Labour Congress recognized the serious implications of drug use by Canadian workers in a paper presented to a House of Commons committee in 1986:

The costs of alcohol and drug use are monumental. The costs can be assessed in health, social and economic terms. Injuries, illnesses and death, marital and emotional problems, and unemployment and lost productivity are the actual costs respectively. Every profession, every occupation, every level in the labour-management hierarchy, and every geographic region of the country is affected by alcohol and drug abuse. (40)

Although estimates of the probable cost to society resulting from drug problems may vary widely, it is generally agreed that they are enormous.

POLICY IMPLICATIONS

The serious social and economic implications of illegal drug problems point the way to some possible national and international policy

(39) Information provided by the Addiction Research Foundation, Toronto, based on Adrian (1989).

(40) "Booze, Pills and Dope: Reducing Substance Abuse in Canada," (1987), p. 23.

options. Representatives of 138 national governments at the 1987 International Conference on Drug Abuse and Illicit Trafficking adopted a declaration expressing their commitment to action and cooperation at all levels toward the goal of an international society free of drug abuse. To that end, they agreed on a number of detailed targets for action, including the assets and equipment of drug traffickers. The Canadian government, for one, has made the profits of illegal drug transactions subject to seizure.

The Conference approved a comprehensive outline for action with four main sections: "prevention and reduction of demand; control of supply; suppression of illicit trafficking; and treatment and rehabilitation."⁽⁴¹⁾ To reduce the supply of and demand for illegal drugs will require a combination of legal sanctions, educational efforts and public health approaches.

Greater knowledge is needed of how drugs work and how to deal with addictive disorders. The extreme difficulty of finding solutions to drug abuse problems is a result of the complexity of the interaction of biological, social, psychological and cultural forces. Research in these areas should be made a long-term priority.

Policies of screening for drugs have been proposed, to limit the harm resulting from their use. Techniques are available to test for the presence of drugs in the body but such testing raises some difficult issues, including concerns over the invasion of privacy. Drug screening programs, however, are now in use by many employers in the United States and by a few in Canada. The White House Conference in 1988 concluded that "appropriate drug testing is essential in the public and private sectors."⁽⁴²⁾ Screening programs to detect steroid use by athletes are being developed also for some competitive sports.

In the field of criminal law, it has been noted that the data, previously mentioned, on urine testing of arrested persons suggest an obvious course of action. "We must institutionalize routine urinalysis for those arrested for any of the typical crimes arising out of drug use...(and

(41) *U.N. Chronicle*, August 1987, p.8.

(42) White House Conference Report, p. 9.

make) maintenance of a urine clean of cocaine, heroin and PCP a requirement for all those who are released on bail...or...on probation or...on parole. A positive urine sample must reliably and immediately mean a return to jail. It is far more important that the enforcement of these rules be consistent than that the jail terms be long."(43)

To many, long jail terms are a logical part of any battle against illegal drugs. This approach, however, has contributed to an overloading of the criminal justice systems in Canada and elsewhere. There is wide support for proposals to give prison sentences only to violent and serious offenders, and to develop alternative approaches to the sentencing of others.

Resources are needed in the health field for treatment and rehabilitation programs for the primary victims of the traffic in illegal drugs, the consumers who become addicted. In particular, the new threat of AIDS through intravenous drug use has made imperative the development of preventive policies. At a meeting in Ottawa in November 1988, the National Associations Active in Criminal Justice passed recommendations that "needles, syringes and facilities for decontaminating needles be made available to injection drug users....(and) to inmates in correctional institutions" and that surveys be carried out to monitor the spread of AIDS.(44)

An important strategy in the prevention of drug abuse is the development of effective means of warning young people about its dangers. The Task Force on Illegal Drug Use in Ontario in 1988 recommended mandatory drug education in school, beginning in the primary division.

The Canadian National Drug Strategy has emphasized the importance of education, as well as prevention and treatment. It has included plans to improve legislation and regulations for drug control, to increase monitoring and enforcement, to support research and to further the international cooperation that is needed to fight drug abuse.

(43) John Kaplan, "Taking Drugs Seriously", *Public Interest*, Summer 1988, p. 3250, at p. 47.

(44) "Reducing the Harm of Drug Use: Legalization and Other Issues", *Justice Report*, Spring 1989, p. 12.

BIBLIOGRAPHY

- Adrian, M., P. M. Jull, and R.T. Williams. (Comp.). *Statistics on Alcohol and Drug Use in Canada and Other Countries*. Alcoholism and Drug Addiction Research Foundation, Toronto, 1989.
- Axel, Helen, ed. *Corporate Strategies for Controlling Substance Abuse*. Report No. 863. The Conference Board, Inc., New York, 1986.
- Blackwell, Judith C., and Patricia G. Erickson. *Illicit Drugs in Canada*. Nelson Canada, Scarborough, 1988.
- Bruno, Francesco. *Combatting Drug Abuse and Related Crime*. United Nations Social Defence Research Institute, Rome, 1984.
- Canada, House of Commons, Standing Committee on National Health and Welfare. Report "Booze, Pills and Dope: Reducing Substance Abuse in Canada." October 1987.
- Canada, House of Commons, Standing Committee on Health, Welfare and Social Affairs. Report "Child Abuse and Neglect." 1976.
- Chase, Naomi Feigelson. *A Child Is Being Beaten*. Holt, Rinehart, New York, 1975.
- Erickson, Patricia G., et al. *The Steel Drug: Cocaine in Perspective*. Lexington Books, Toronto, 1987
- Hawkins, J. David, et al. "Delinquency and Drug Abuse: Implications for Social Services." *Social Service Review*, June 1988, p.258-284.
- Justice Report*. Summer 1988 and Spring 1989.
- Kaplan, John. "Taking Drugs Seriously." *Public Interest*. Summer 1988, p.32-50.
- Malarek, Victor. "Crack Use Near Epidemic, Toronto Police Warn." *The Globe and Mail* (Toronto), 11 February 1989.
- McKenzie, Helen. "Drug Abuse in Canada." Current Issue Review 87-7E. Research Branch, Library of Parliament, Ottawa, 1989.
- MacLeod, Linda. *Battered But Not Beaten: Preventing Wife Battering in Canada*, Canadian Advisory Council on the Status of Women, Ottawa 1987.
- Parakulam, George. "Promoting the Health of Albertans: A Study of Practices, Attitudes and Beliefs Impinging on Chronic Disease Prevention." Alberta Department of Community and Occupational Health, Edmonton 1987.

- Porter, L., A.E. Arif and W.J. Curran. *The Law and the Treatment of Drug and Alcohol-Dependent Persons*. World Health Organization, Geneva, 1986.
- Rexed, B. et al. *Guidelines for the Control of Narcotic and Psychotropic Substances*. World Health Organization, Geneva, 1984.
- Royal Canadian Mounted Police. *National Drug Intelligence Estimate 1987/88*. Minister of Supply and Services, Ottawa 1988.
- Smart, R.G., and E.M. Adlaf. *Alcohol and Other Drug Use Among Ontario Adults 1977-1987*. Alcoholism and Drug Addiction Foundation, Toronto, 1987.
- Statistics Canada. *Juristat Service Bulletin*. Catalogue 85-002. May 1988.
- Toborg, Mary A., et al. The Washington, D.C., *Urine Testing Program for Arrestees and Defendants Awaiting Trial: A Summary of Interim Findings*. Toborg Associates, Inc., Washington, D.C., 1986.
- The White House Conference for a Drug Free America*. Final Report. U.S. Government Printing Office, Washington D.C., 1988.
- U.N. Chronicle. Volume XXIV, No. 3, August 1987.

